1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Adair County Schools		State
	Street Address 1204 Greensburg St		
	City, State Zip Columbia, KY 42728		☐ Other:
		8	Method of Payment:
2	KDE Contact Information:	Para .	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-51	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers	-6	Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002048		Electronic Submission
			Other Submission of quarterly reimbursement
_	Over (A off a city (Over a)		package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 299,000	11	Evaluations: Submission of an annual report to Kentucky
3	TEVIOLD Award Amount. \$ 255,000		Department of Education is required
	See budget breakdown on contract.	-0.00	Boparanon of Education to required
6	Period of Award:	HAN	ED FOR
	August 1, 2015 - September 30, 2016		C C
12	Consortia/Partnership Members:		3 3
13	Special Instructions/Conditions:		
	Grants (New, Continuation, and Expansion) awarded for five years/projects	of fund	ling, as stated in the Request for Application, based upon
	availability of funds from the United States Department of Education. Cont	racts ar	nd award notifications will be prepared based upon the
	timeframes allowed by the Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
	Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Ballard County Schools			☐ State
	Street Address 3465 Paducah Rd			
	City, State Zip Barlow, KY 42024			Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4	072	W -	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT			Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext	. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT	117	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601			
	City, it is a second control of the	-23=	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:	- M	_	Monthly
	Description 21st Century Community Learning C	Centers		☐ Quarterly
	Fund Source No Child Left Behind Act, Title IV, F		1	Other
	CFDA# 84.287C	arts	9	
	MUNIS Project Number See budget on contract		10	Financial Reporting Method:
	MOA Number PON2-540-1500002049			Electronic Submission
	1 51/2 516 1000002516			Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):	6 1		paoriago
-	No Child Left Behind Act of 2001, Title IV, Part B, Education Departs	ment General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform G		1_	
	Guidance, 2 CFR § 200	TO IN		
5	REVISED Award Amount: \$ 319,000	V V	11	Evaluations: Submission of an annual report to Kentucky
		Y		Department of Education is required
	See budget breakdown on contract.	& PDE	AD	ED EOD
6	Period of Award:	OK II IILI	24/1	ED FOR
	August 1, 2015 - September 30, 2016			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:		- 5-	NI CATION
	Grants (New, Continuation, and Expansion) awarded for five ye			
	availability of funds from the United States Department of Educ		cts and	d award notifications will be prepared based upon the
	timeframes allowed by the Kentucky Finance & Administration	Cabinet.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director			Date: June 24, 2016
	Division of Consolidated Plans & Au	udits		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Barren County Schools			☐ State
	Street Address 202 W Washington St			□ Federal
	City, State Zip Glasgow,	KY 42141		Other:
			8	Method of Payment:
2	KDE Contact Information:	-1 -1	3	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-55	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1600000010		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		01, Title IV, Part B, Education Department General		
		CFR 76,77, 82 and 85 and Uniform Grant	1	
	Guidance, <u>2 CFR § 200</u>			
5	REVISED Award Amount: \$ 8	04,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on co	ontract. PROFICIENT & PRE	PAR	ED FOR
6	Period of Award:			C C
12	September 29, 2015 - Septemb			3 3
12	Consortia/Partnership Memb			
13	Special Instructions/Condition		as Er	MICATION in the Demical for Application, beautiful
				ing, as stated in the Request for Application, based upon
		entucky Finance & Administration Cabinet.	acts an	d award notifications will be prepared based upon the
14		Donna Tackett, Acting Director		Date: June 24, 2016
'*	Authorized by (Name/Title).	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
<u></u>		DIVISION OF CONSONIUATER FIRMS & AUGITS		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Bethune Institute		☐ State
	Street Address PO Box 910240		□ Federal
	City, State Zip Lexington, KY 40591		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	W po	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C	7	
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1600002768		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 7,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
12	May 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	va En	ALICATION in the Demices for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	oto on	my, as stated in the Request for Application, based upon
	timeframes allowed by the Kentucky Finance & Administration Cabinet.	บเอ สก	u awaru nouncations will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
17	Division of Consolidated Plans & Audits		Duto. Dutio 24, 2010
	Division of Contonidated Flans & Addits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Boone C	ounty Schools		State
	Street Address 8330 US	3 42		□ Federal
	City, State Zip Florence	e, KY 41042		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.5	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	II II -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	PH // /	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002477		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	158,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:	6 11 6 6		6 6
10	July 1, 2015 - September 30,		No.	5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		og Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Deta: June 24 2040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Bourbor	County Schools		State
	Street Address 3343 Le	xington Rd		□ Federal
	City, State Zip Paris, K	Y 40361		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	1	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-53	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500001278		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant	1 1	
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	237,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on	contract December 0 D		Department of Education is required
6	Period of Award:	PROFICIENT & PRI	EP AR	ED FOR
•	February 15, 2015 - Septemb	per 30, 2016		CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit			
			of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		and the second s
14		: Donna Tackett, Acting Director		Date: June 24, 2016
]	Division of Consolidated Plans & Audits		•
1	L			

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Boyd Co	unty Schools		☐ State
	Street Address 1104 Bol	b McCullough Dr		
	City, State Zip Ashland,	KY 41102		Other:
			8	Method of Payment:
2	KDE Contact Information:		220	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	1111	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	M//	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C	1	
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002472		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1111131
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	113,000	11	Evaluations: Submission of an annual report to Kentucky
			100	Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PD	EDAR	ED EOR
6	Period of Award:	P HOTICIENT OF THE		
	July 1, 2015 - September 30,			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condition		or Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
L		Kentucky Finance & Administration Cabinet.		D
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Boys and Girls Club Inc			State
	Street Address 3900 Cri	ttenden Drive		□ Federal
	City, State Zip Louisville	e, KY 40209		☐ Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-4.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002097		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-1 3
		001, Title IV, Part B, Education Department Gene	ral	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	133,578	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:			6 6
40	August 1, 2015 - September 3			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Conditi		T OF E	DUCATION
				ing, as stated in the Request for Application, based upon
			ntracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Date: June 24 2046
14	Authorized by (Name/Title):	Donna Tackett, Acting Director Division of Consolidated Plans & Audits		Date: June 24, 2016
		DIVISION OF CONSOLIDATED PLANS & AUGIS		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Breathitt County Schools			State
	Street Address PO Box	750		□ Federal
	City, State Zip Jackson	, KY 41339		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.0	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	-	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002473		Electronic Submission
				Other Submission of quarterly reimbursement
				_package
4	Grant Authority (Source):			
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	156,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on o	contract. Professional & Professional Profes	EDAD	FD FOR
6	Period of Award:	FROFICIENT OX FRI	HAK	ED FOR
	July, 1, 2015 - September 30	2016	E	CC
12	Consortia/Partnership Mem	bers:		3 3
13	Special Instructions/Condit			
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Burgin Ir	ndependent Schools		State
	Street Address PO Box	В		□ Federal
	City, State Zip Burgin, I	Y 40310		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.5	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	WW -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	,	-4.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002474		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	158,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:	2040 C III C C		C C
40	July 1, 2015 - September 30,			3 3
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		or Er	ALICATION in the Demices for Application, heard with
				ing, as stated in the Request for Application, based upon d award notifications will be prepared based upon the
		e United States Department of Education. Con Kentucky Finance & Administration Cabinet.	u acts an	u awaru nouncations will be prepared based upon the
14		: Donna Tackett, Acting Director		Date: June 24, 2016
'	Additionized by (Maine/Title)	Division of Consolidated Plans & Audits		Date. Sun 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recip	pient:	7	Fund Type:
		ell County Schools		State
	Street Address 101 Orcl	hard Ln		□ Federal
	City, State Zip Alexand	ria, KY 41001		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	III -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	-53	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002053		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	626,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:	C II C C		6 6
40	August 1, 2015 - September			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		OF E	DUCATION
				ing, as stated in the Request for Application, based upon
			itracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Data: June 24, 2046
14	Authorized by (Name/1itle):	: Donna Tackett, Acting Director Division of Consolidated Plans & Audits		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

Agency Name Campbellsville Independent Schools Street Address 136 S Columbia City, State Zip Campbellsville, KY 42718 ■ State ■ Federal ■ Other: ■ Method of Payment:	
City, State Zip Campbellsville, KY 42718	
9 Mothod of Poyments	
9 Mothed of Doymonts	
o Method of Payment:	
2 KDE Contact Information:	
Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Superior Expenditure Reimbursement	
Street Address 500 Mero St., 19th Fl. CPT Automatic Payment	
Budget Contact Thelma Hawkins 502-564-1979 ext. 4361 Lump Sum	
Street Address 500 Mero St., 16th Fl. CPT Receipt of Invoice from Vendor	
City, KY Zip Frankfort, Kentucky 40601	
9 Reimbursement Frequency:	
3 Description/Fund Source of Award and Fiscal Year:	
Description 21st Century Community Learning Centers Quarterly	
Fund Source No Child Left Behind Act, Title IV, Part B Other	
CFDA# 84.287C	
MUNIS Project Number See budget on contract 10 Financial Reporting Method:	
MOA Number PON2-540-1500002054 Electronic Submission	
Other Submission of quarterly re	imbursement
package	
4 Grant Authority (Source):	
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General	
Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant	
Guidance, 2 CFR § 200	
5 REVISED Award Amount: \$ 82,000 11 Evaluations: Submission of an annual repo	ort to Kentucky
Department of Education is required	
See budget breakdown on contract.	
6 Period of Award:	
August 1, 2015 - September 30, 2016	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions:	
Grants (New, Continuation, and Expansion) awarded for five years/projects of funding, as stated in the Request for Applicatio	
availability of funds from the United States Department of Education. Contracts and award notifications will be prepared base	ed upon the
timeframes allowed by the Kentucky Finance & Administration Cabinet.	
14 Authorized By (Name/Title): Donna Tackett, Acting Director Date: June 24, 2016	
Division of Consolidated Plans & Audits	

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Casey County Schools		☐ State
	Street Address 1922 N US 127		□ Federal
	City, State Zip Liberty, KY 42539		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	W p	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500001813		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant	1.1	
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 85,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
40	May 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	og Er	MICATION in the Demical for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	or Tund	my, as stated in the Request for Application, based upon
	timeframes allowed by the Kentucky Finance & Administration Cabinet.	สบเช สก	u awaru nouncations will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
'-	Division of Consolidated Plans & Audits		Date: 04110 24, 2010
L	Division of Consolidated Fians & Addits		

1	Name and Address of Recipient:			7	Fund Type:
	Agency Name Caverna Independe	nt Schools			State
	Street Address 1102 N. Dixie Hwy				
	City, State Zip Cave City, KY 4212	27			Other:
				8	Method of Payment:
2	KDE Contact Information:				Federal Cash Request
		Stacy 502-564-1473 ext. 40	072	V P	Expenditure Reimbursement
		o St., 19th Fl. CPT		17.12	Automatic Payment
	0	Hawkins 502-564-1979 ext.	4361		Lump Sum
	Street Address 500 Me	o St., 16th Fl. CPT	-111	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfo	rt, Kentucky 40601	- \		
			-55	9	Reimbursement Frequency:
3	Description/Fund Source of Award an	d Fiscal Year:			☐ Monthly
	Description 21st Cer	ntury Community Learning C	Centers Centers		□ Quarterly
	Fund Source No Chile	Left Behind Act, Title IV, P	art B		Other
	CFDA# 84.2870			7	
	MUNIS Project Number See bud	lget on contract		10	Financial Reporting Method:
		40-1500002056			Electronic Submission
					Other Submission of quarterly reimbursement
			/ /		package
4	Grant Authority (Source):	(V7/			
	No Child Left Behind Act of 2001, Title I\	/, Part B, Education Departr	ment General		
	Administrative Regulations 34 CFR 76,7	7, 82 and 85 and Uniform G	rant		
	Guidance, 2 CFR § 200				
5	REVISED Award Amount: \$ 82,000		V = V	11	Evaluations: Submission of an annual report to Kentucky
	See budget breakdown on contract.	D	0 D		Department of Education is required
6	Period of Award:	PROFICIENT	CX PREF	PAR	ED FOR
	August 1, 2015 - September 30, 2016	S II C			CC
12	Consortia/Partnership Members:	3 0 6			3 3
13	Special Instructions/Conditions:	17		-	
		sion) awarded for five ve	ars/projects of	f fundi	ling, as stated in the Request for Application, based upon
					nd award notifications will be prepared based upon the
	timeframes allowed by the Kentucky I				The second secon
14	Authorized By (Name/Title): Donna 7				Date: June 24, 2016
		of Consolidated Plans & Au	dits		,

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Clinton (County Schools		State
	Street Address 2353 N F	Hwy 127		□ Federal
	City, State Zip Albany, I	KY 42602		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	M//	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-4.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002057		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 20	001, Title IV, Part B, Education Department Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	162,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:	6 11 6 6		6 6
10	August 1, 2015 - September 3			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		os Es	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Deta: June 24 2040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Cloverpo	ort Independent Schools		State
	Street Address PO Box	37		□ Federal
	City, State Zip Cloverpo	ort, KY 40111		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	,	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002058		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	82,000	11	Evaluations: Submission of an annual report to Kentucky
	Cookerdant baseledous on	D 0 D		Department of Education is required
6	See budget breakdown on or Period of Award:	CONTRACT. PROFICIENT & PR	EP AR	ED FOR
0	August 1, 2015 - September 3	20 2016		CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit			25-25
13			s of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.	4010 411	a arraid remissations will be propared based apon the
14		Donna Tackett, Acting Director		Date: June 24, 2016
	, , , , , ,	Division of Consolidated Plans & Audits		,

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Corbin II	ndependent Schools		State
	Street Address 108 Roy	Kidd Ave		□ Federal
	City, State Zip Corbin, I	KY 40701		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.0	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	II II -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	PH // /	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1600000011		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
	Administrative Regulations 34	4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	316,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:			6 6
40	August 1, 2015 - September			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		OF E	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Data: June 24, 2046
14	Authorized by (Name/Title):	: Donna Tackett, Acting Director Division of Consolidated Plans & Audits		Date: June 24, 2016
L		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Covingto	on Independent Schools		State
	Street Address 25 E Se	venth St		□ Federal
	City, State Zip Covingto	on, KY 41011		Other:
			8	Method of Payment:
2	KDE Contact Information:		5360	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	1	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	, ,	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002060		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):	(V7)		-
	No Child Left Behind Act of 2	001, Title IV, Part B, Education Department Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	550,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on	contract December 9 Dec		Department of Education is required
6	Period of Award:	PROFICIENT & PRI	EPAR	ED FOR
•	July 1, 2015 - September 30,	2016		CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit			
			of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		1 The second section 2
14		: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Cumber	land County Schools		State
	Street Address PO Box	420		□ Federal
	City, State Zip Burkesv	ille, KY 42717		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.0	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	II II -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	PH // /	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002062		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	230,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:	6 11 6 6		6 6
10	August 1, 2015 - September		No.	5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		og Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Deta: June 24 2040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Eminence Independent Schools		State
	Street Address 291 W Broadway		
	City, State Zip Eminence, KY 40019		☐ Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-44	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers	1 (- 0	□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C	1	
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002063	1	Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department Gel	neral	
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 82,000	12	
	See budget breakdown on contract.		Department of Education is required
6	Period of Award:	REPA	RED FOR
	August 1, 2015 - September 30, 2016		C C
12	Consortia/Partnership Members:		3 3
13	Special Instructions/Conditions:		_
	Grants (New, Continuation, and Expansion) awarded for five years/proje	ects of fu	nding, as stated in the Request for Application, based upon
	availability of funds from the United States Department of Education.		
	timeframes allowed by the Kentucky Finance & Administration Cabinet.		and the second s
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
	Division of Consolidated Plans & Audits		•

1	Name and Address of Recipient		7	Fund Type:
	Agency Name Fayette Cour			State
	Street Address PO Box 5549	90		□ Federal
	City, State Zip Lexington, K	Y 40555		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
		Brigette Stacy 502-564-1473 ext. 4072		
		00 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact T	helma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 5	00 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip F	rankfort, Kentucky 40601	-	
		-4.3	9	Reimbursement Frequency:
3	Description/Fund Source of Awa	ard and Fiscal Year:		Monthly
		1st Century Community Learning Centers		□ Quarterly
		lo Child Left Behind Act, Title IV, Part B		Other
		4.287C		
	MUNIS Project Number S	See budget on contract	10	Financial Reporting Method:
		ON2-540-1600000012		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			· · ·
	No Child Left Behind Act of 2001,	Title IV, Part B, Education Department Gen	eral	
	Administrative Regulations 34 CF	R 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$ 306	,000	11	Evaluations: Submission of an annual report to Kentucky
	01111	0.0		Department of Education is required
c	See budget breakdown on control Period of Award:	ract. PROFICIENT & P	REPAR	RED FOR
6	August 1, 2015 - September 30, 2	016 6 11 6 6		CC
12	Consortia/Partnership Members		_	3 3
13	Special Instructions/Conditions			
13			cts of fund	ding, as stated in the Request for Application, based upon
				nd award notifications will be prepared based upon the
		ucky Finance & Administration Cabinet.	J 4015 41	na anala nemisatione uni se proparea sacca apen tile
14	Authorized By (Name/Title): D			Date: June 24, 2016
		ivision of Consolidated Plans & Audits		,
	,			

1	Name and Address of Reci	pient:	7	Fund Type:
	Agency Name Floyd C	ounty Schools		State
	Street Address 106 N F	ront Ave		□ Federal
	City, State Zip Preston	sburg, KY 41653		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	1	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	-53	9	Reimbursement Frequency:
3	Description/Fund Source o	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500001279		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-1 5
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al \	
		4 CFR 76,77, 82 and 85 and Uniform Grant	1 1 -	
	Guidance, 2 CFR § 200			
5	REVISED Award Amount:	5 160,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:			6 6
40	February 15, 2015 - Septemb Consortia/Partnership Mem			3 3
12	•			
13	Special Instructions/Conditions		og Er	AUGATION:
				ing, as stated in the Request for Application, based upon
		ie United States Department of Education. Cont Kentucky Finance & Administration Cabinet.	racts an	d award notifications will be prepared based upon the
14		: Donna Tackett, Acting Director		Date: June 24, 2016
14	Additionized by (Name/Title)	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Fulton County Schools		☐ State
	Street Address 2780 Moscow Ave		
	City, State Zip Hickman, KY 42050		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	7 0	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT	11/1/	Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		☐ Monthly
	Description 21st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002065		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 82,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
12	August 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:	- i	
13	Special Instructions/Conditions:	a Er	ALICATION in the Demices for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects o	rtundi	my, as stated in the Request for Application, based upon
	availability of funds from the United States Department of Education. Contra timeframes allowed by the Kentucky Finance & Administration Cabinet.	บเร an	u awaru notifications will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
14	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
<u> </u>	Division of Consolidated Flans & Addits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Fulton Ir	ndependent Schools		State
	Street Address 304 Wes	st State Line		
	City, State Zip Fulton, Ł	(Y 42041		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HI/	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	(- (1)	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002066		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	157,000	11	Evaluations: Submission of an annual report to Kentucky
		0.0		Department of Education is required
•	See budget breakdown on	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:	00 0040		C C
12	August 1, 2015 - September Consortia/Partnership Mem		Dist.	3 3
	-		-	
13	Special Instructions/Condit		or Fr	ALICATION in the Demises for Application beautiful.
				ing, as stated in the Request for Application, based upon
		le United States Department of Education. Cor Kentucky Finance & Administration Cabinet.	iiracts an	d award notifications will be prepared based upon the
14		: Donna Tackett, Acting Director		Date: June 24, 2016
'-	Additionized by (Hame/Title)	Division of Consolidated Plans & Audits		Date. Sun 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Garrard	County Schools		State
	Street Address 322 W N	Maple St		
	City, State Zip Lancaste	er, KY 40444		Other:
			8	Method of Payment:
2	KDE Contact Information:		220	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	,	-4.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002067		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
	Administrative Regulations 34	4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	80,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:	00 0040		6 6
40	August 1, 2015 - September			3 3
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		or Er	ALICATION in the Demices for Application, heard areas
				ing, as stated in the Request for Application, based upon d award notifications will be prepared based upon the
		le United States Department of Education. Com Kentucky Finance & Administration Cabinet.	iracis an	u awaru nouncations will be prepared based upon the
14		: Donna Tackett, Acting Director		Date: June 24, 2016
'-	Additionized by (Maine/Title)	Division of Consolidated Plans & Audits		Date. Sunc 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Greenup County S	chools		☐ State
	Street Address 45 Musketeer Dr			
	City, State Zip Greenup, KY 4114	.4		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant Brigette	Stacy 502-564-1473 ext. 4072		
	Street Address 500 Me	ro St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma	Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Me	ro St., 16th Fl. CPT	/ /	Receipt of Invoice from Vendor
	City, KY Zip Frankfo	rt, Kentucky 40601		
		<u>~</u>	9	Reimbursement Frequency:
3	Description/Fund Source of Award ar	nd Fiscal Year:	7	Monthly
		ntury Community Learning Ce <mark>nte</mark> rs		□ Quarterly
		d Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287			
	MUNIS Project Number See bu	dget on contract	10	Financial Reporting Method:
		540-1600000013		Electronic Submission
				Other Submission of quarterly reimbursement
		<i>→</i>		package
4	Grant Authority (Source):	(V7)		
	No Child Left Behind Act of 2001, Title I'		eneral	
	Administrative Regulations 34 CFR 76,7	7, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$ 171,000		11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on contract.	Doorester 0. I	0	Department of Education is required
6	Period of Award:	PROFICIENT & I	REPAR	RED FOR
	August 1, 2015 - September 30, 2016			CC
12	Consortia/Partnership Members:	3 0 6 6		3 3
13	Special Instructions/Conditions:	17	-	
		nsion) awarded for five vears/pr	piects of fund	ding, as stated in the Request for Application, based upon
				nd award notifications will be prepared based upon the
	timeframes allowed by the Kentucky			
14	Authorized By (Name/Title): Donna			Date: June 24, 2016
	Division	of Consolidated Plans & Audits		
-				

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Hancock County Schools		☐ State
	Street Address 83 State Rt 271 N		□ Federal
	City, State Zip Hawesville, KY 42348		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	W po	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002071		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 82,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
42	August 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	va. En	MICATION in the Demical for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	oto on	my, as stated in the Request for Application, based upon
	availability of funds from the United States Department of Education. Contra timeframes allowed by the Kentucky Finance & Administration Cabinet.	cts an	u awaru notifications will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
14	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
L	Division of Consolidated Flans & Addits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Hazard F	Perry Co Com MNS Development Ctr		☐ State
	Street Address 151 Miss	s Edna LN		
	City, State Zip Hazard,	KY 41701		Other:
				·
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	"	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	_	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-47	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:	N	Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002099		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gene	eral	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	237,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. Profice I & Pr	EDAR	FD FOR
6	Period of Award:		U-1 / 1/10	
	August 1, 2015 - September 3			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condition		T OF E	DUCATION
				ing, as stated in the Request for Application, based upon
			ntracts and	d award notifications will be prepared based upon the
L		Kentucky Finance & Administration Cabinet.		D
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Henders	on County Schools		State
	Street Address 1805 Se	cond St		
	City, State Zip Henders	on, KY 42420		Other:
			8	Method of Payment:
2	KDE Contact Information:		122	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	MIN -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-4.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002072		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			100.00
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	317,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. Decement & De	EDAR	FD FOR
6	Period of Award:	THOTICIENT OF THE	-/////	LD I OIL
	August 1, 2015 - September 3		E	5 5
12	Consortia/Partnership Mem	bers:	Dies	
13	Special Instructions/Condit		or E	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Hickmar	County Schools		State
	Street Address 416 Wat	erfield Dr		□ Federal
	City, State Zip Clinton,	KY 42031		Other:
			8	Method of Payment:
2	KDE Contact Information:		122	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-5.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002476		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1 22 232
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	111,000	11	Evaluations: Submission of an annual report to Kentucky
		Z 1 1		Department of Education is required
	See budget breakdown on o	contract. Profice ENT & Pr	EDAR	ED EOR
6	Period of Award:	THOTICIENT OCT III	-/////	LD T ON
	July 1, 2015 - September 30,		E	5 5
12	Consortia/Partnership Mem	bers:	liber .	
13	Special Instructions/Condit		or E	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Jackson	Independent Schools		State
	Street Address 940 High	nland Ave		□ Federal
	City, State Zip Jackson	, KY 41339		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.0	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	-	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002073		Electronic Submission
				Other Submission of quarterly reimbursement
				_package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	82,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on o	contract Description O. Des		Department of Education is required
6	Period of Award:	PROFICIENT & PRI	EPAK	ED FOR
	August 1, 2015 - September 3	30, 2016		CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit	ions:	-	
	Grants (New, Continuation,	and Expansion) awarded for five years/projects	of fund	ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

Agency Name Knott County Schools Street Address PO Box 869 City, State Zip Hindman, KY 41822 □ State □ Federal □ Other: □ Other:	
City, State Zip Hindman, KY 41822	
8 Method of Payment:	
2 KDE Contact Information: Federal Cash Request	
Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Expenditure Reimbursement	
Street Address 500 Mero St., 19th Fl. CPT Automatic Payment	
Budget Contact Thelma Hawkins 502-564-1979 ext. 4361 Lump Sum	
Street Address 500 Mero St., 16th Fl. CPT Receipt of Invoice from Vendor	
City, KY Zip Frankfort, Kentucky 40601	
9 Reimbursement Frequency:	
3 Description/Fund Source of Award and Fiscal Year:	
Description 21 st Century Community Learning Centers Quarterly	
Fund Source No Child Left Behind Act, Title IV, Part B	
CFDA# 84.287C	
MUNIS Project Number See budget on contract 10 Financial Reporting Method:	
MOA Number PON2-540-1500002074 Electronic Submission	
Other Submission of quarterly	reimbursement
package	
4 Grant Authority (Source):	
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General	
Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant	
Guidance, 2 CFR § 200	
5 REVISED Award Amount: \$ 163,000 11 Evaluations: Submission of an annual re	eport to Kentucky
Department of Education is required	
See budget breakdown on contract.	
6 Period of Award:	
July 1, 2015 - September 30, 2016	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions:	
Grants (New, Continuation, and Expansion) awarded for five years/projects of funding, as stated in the Request for Applica	
availability of funds from the United States Department of Education. Contracts and award notifications will be prepared by	ased upon the
timeframes allowed by the Kentucky Finance & Administration Cabinet.	
14 Authorized By (Name/Title): Donna Tackett, Acting Director Date: June 24, 2016	
Division of Consolidated Plans & Audits	

1	Name and Address of Recip		7	Fund Type:
	Agency Name Leslie Co	ounty Schools		☐ State
	Street Address PO Box	949		
	City, State Zip Hyden, k	(Y 41749		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	MIN -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-5.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002075		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 20	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	321,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6	Period of Award:	6 11 6 6		6 6
10	August 1, 2015 - September 3			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condition		or Er	DUCATION
				ing, as stated in the Request for Application, based upon
			itracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		Deter hims 24 2040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Letcher	County Schools		☐ State
	Street Address 224 Park	< St		
	City, State Zip Whitesb	urg, KY 41858		Other:
			8	Method of Payment:
2	KDE Contact Information:		224	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-23	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002076		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1 13
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	276,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EDAR	ED EOR
6	Period of Award:	THOTICIENT OCT III	-/////	LD T ON
	July 1, 2015 - September 30,			6 6
12	Consortia/Partnership Mem	bers:	Disco	
13	Special Instructions/Condit		or Er	NII CATIONI
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		
		Division of Consolidated Flans & Addits		

1	Name and Address of Reci	pient:	7	Fund Type:
	Agency Name Lighthou	use Promise, Inc.		State
	Street Address 5312 OI	d Shepherdsville Road		□ Federal
	City, State Zip Louisvill	e, KY 40228		Other:
			8	Method of Payment:
2	KDE Contact Information:		1.000	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	MIN -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-5.5	9	Reimbursement Frequency:
3	Description/Fund Source o	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002100		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Education Department General	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	5 82,000	11	Evaluations: Submission of an annual report to Kentucky
	Coo budget breekdeum en			Department of Education is required
6	See budget breakdown on Period of Award:	PROFICIENT & PR	EP AR	ED FOR
"	August 1, 2015 - September	30, 2016		CC
12	Consortia/Partnership Men			3 3
13	Special Instructions/Condi			
13			s of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.	ii. doto an	a anala nolinoationo um bo proparoa bacca apon tito
14		: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		,,
	I			

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Lincoln (County Schools		State
	Street Address 305 Dan	ville Ave		□ Federal
	City, State Zip Stanford	l, KY 40484		Other:
			8	Method of Payment:
2	KDE Contact Information:		5363	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	M W -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002077		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	355,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	FD FOR
6	Period of Award:			6 6
	July 1, 2015 - September 30,		Sec.	5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		or Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
4.4		Kentucky Finance & Administration Cabinet.		D-1 1 04 0040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Livingsto	on County Schools		State
	Street Address PO Box	219		□ Federal
	City, State Zip Smithlar	nd, KY 42081		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	III -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HIII	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-53	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002078		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	756,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. December 2 De	EDAR	ED EOR
6	Period of Award:	Thorical of the	-1700	LD I OIL
	July 1, 2015 - September 30,		-	8 8
12	Consortia/Partnership Mem	bers:	library.	
13	Special Instructions/Condit		- OF E-	CUCATION
				ing, as stated in the Request for Application, based upon
			itracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		
		Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Lotts Cre	ek Community School		State
	Street Address 5837 Lotts Creek Road, Cordia			
	City, State Zip Hazard,	KY 41701		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		
	Street Address	500 Mero St., 19th Fl. CPT	RI I I	│
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	_	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002101		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 20	001, Title IV, Part B, Education Department Gener	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	82,000	11	Evaluations: Submission of an annual report to Kentucky
	0 - 1 - 1 - 1 - 1 - 1 - 1	0.0		Department of Education is required
6	See budget breakdown on control Period of Award:	ontract. PROFICIENT & PR	<i>EPAR</i>	ED FOR
6	August 1, 2015 - September 3	00 2016 C III C C		C C
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Conditi		37	- 146 (A17)
13			c of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.	mavis dii	a awara nouncations will be prepared based upon the
14		Donna Tackett, Acting Director		Date: June 24, 2016
	/ tamerized by (itameritatio).	Division of Consolidated Plans & Audits		24101 24, 2010
L	<u> </u>	Enterent of Controlled to the Controlled		

Agency Name Ludlow Independent Schools □ State Street Address 525 Elm St □ Federal	
City, State Zip Ludlow, KY 41016	
8 Method of Payment:	
2 KDE Contact Information: Federal Cash Request	
Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Superior Expenditure Reimburseme	ent
Street Address 500 Mero St., 19th Fl. CPT Automatic Payment	
Budget Contact Thelma Hawkins 502-564-1979 ext. 4361 Lump Sum	
Street Address 500 Mero St., 16th Fl. CPT Receipt of Invoice from Ve	endor
City, KY Zip Frankfort, Kentucky 40601	
9 Reimbursement Frequency:	
3 Description/Fund Source of Award and Fiscal Year:	
Description 21st Century Community Learning Centers Quarterly	
Fund Source No Child Left Behind Act, Title IV, Part B Other	
CFDA# 84.287C	
MUNIS Project Number See budget on contract 10 Financial Reporting Method:	
MOA Number PON2-540-1500002079 Electronic Submission	
	quarterly reimbursement
package	,
4 Grant Authority (Source):	
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General	
Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant	
Guidance, 2 CFR § 200	
5 REVISED Award Amount: \$ 319,000 11 Evaluations: Submission of an a	
Department of Education is require	red
See budget breakdown on contract.	
6 Period of Award:	
July 1, 2015 - September 30, 2016	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions:	
Grants (New, Continuation, and Expansion) awarded for five years/projects of funding, as stated in the Request for A	
availability of funds from the United States Department of Education. Contracts and award notifications will be prep	pared based upon the
timeframes allowed by the Kentucky Finance & Administration Cabinet.	
14 Authorized By (Name/Title): Donna Tackett, Acting Director Date: June 24, 2016	
Division of Consolidated Plans & Audits	

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Lyon Co	ounty Schools		State
	Street Address 217 Jenl	kins Rd		□ Federal
	City, State Zip Eddyville	e, KY 42038		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002080		Electronic Submission
				Other Submission of quarterly reimbursement
				_package
4	Grant Authority (Source):			
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	ral	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	67,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & DR	EDAD	Dopartinont of Education is required
6	Period of Award:	FROFICIENT OX FR	EHAK	ED FOR
	August 1, 2015 - September 3	30, 2016		CC
12	Consortia/Partnership Mem	bers:		3 3
13	Special Instructions/Condit			
				ing, as stated in the Request for Application, based upon
			ntracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		
14	Authorized By (Name/Title):	Division of Consolidated Plans & Audits		Date: June 24, 2016

1	Name and Address of Recipient:		Fund Type:
	Agency Name McCracken County Schools		☐ State
	Street Address 5347 Benton Rd		□ Federal
	City, State Zip Paducah, KY 42003		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	W po	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C	7	
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002081		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 714,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
42	July 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	va En	ALICATION in the Demices for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	oto on	my, as stated in the Request for Application, based upon
	timeframes allowed by the Kentucky Finance & Administration Cabinet.	us an	u awaru nouncations will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
14	Division of Consolidated Plans & Audits		Date. June 24, 2010
<u></u>	Division of Consolidated Flans & Addits		

1	Name and Address of Recip		7	Fund Type:
		County Schools		State
	Street Address 109 Sart	in Dr		□ Federal
	City, State Zip Edmonto	on, KY 42129		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	<u>/</u> _	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	Oity, 141 21p	Traintion, Northbooky 10001	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year		Monthly
•	Description Description	21st Century Community Learning Centers	1	Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002082	10	
	WOA Number	FON2-340-1300002002	7	Electronic Submission Other Submission of quarterly reimbursement
4	Grant Authority (Source):		/	_ package
4		001, Title IV, Part B, Education Department Ge	noral	
		For Fait B, Education Department Ge FCFR 76,77, 82 and 85 and Uniform Grant	lierai	
	Guidance, 2 CFR § 200	CFR 70,77, 62 and 65 and Onlibrin Grant		
5	REVISED Award Amount: \$	176,000	11	Evaluations: Submission of an annual report to Kentucky
3	REVISED Award Amount.	170,000	V	Department of Education is required
	See budget breakdown on o	contract Description Q. D	00000	Department of Education is required
6	Period of Award:	PROFICIENT & P	KEPAK	ED FOR
	July 1, 2015 - September 30,	2016		CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit			
			ects of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet		and the second s
14		Donna Tackett, Acting Director		Date: June 24, 2016
	, (Division of Consolidated Plans & Audits		- ,

1	Name and Address of Recip		7	Fund Type:
		County Schools		State
	Street Address 309 Emb	perton St		
	City, State Zip Tompkin	sville, KY 42167		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500001273		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			11113
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gene	ral	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	371,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. Profice I & Pr	EDAR	ED EOR
6	Period of Award:		- 1 2 NO	
	February 24, 2015 - Septemb			5 5
12	Consortia/Partnership Mem		, Direct	
13	Special Instructions/Condition		- o- E-	NICATION
				ing, as stated in the Request for Application, based upon
			ntracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
1		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Nelson (County Schools		State
	Street Address 288 Wild	cat Ln		□ Federal
	City, State Zip Bardstov	wn, KY 40004		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-4.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	- 0	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002611		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, <u>2 CFR § 200</u>			
5	REVISED Award Amount: \$	88,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on	contract. Description 9- Des		Dopartinont of Education is required
6	Period of Award:	PROFICIENT & PRI	EFAK	ED FOR
	July 1, 2015 - September 30,	2016	100	CC
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit	ions:	-	
	Grants (New, Continuation,	and Expansion) awarded for five years/projects	of fund	ing, as stated in the Request for Application, based upon
	availability of funds from th	e United States Department of Education. Con-		d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title)	: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Newport	Independent Schools		State
	Street Address 301 W E	ighth St		□ Federal
	City, State Zip Newport	, KY 41071		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-43	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002084		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):	(V2)		-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gene	ral	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	82,000	11	Evaluations: Submission of an annual report to Kentucky
		0.0		Department of Education is required
_	See budget breakdown on o	contract. PROFICIENT & PR	REPAR	ED FOR
6	August 1, 2015 - September	20, 2016		C C
12	Consortia/Partnership Mem			3 3
13	Special Instructions/Condit		54 - 2	140, 25 L 250, 261
13			ts of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.	doto dii	a anala nolinoationo um bo proparoa bacca apon tito
14		Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		,,
	I .			

1	Name and Address of Recipient:		Fund Type:
	Agency Name Nicholas County Schools		☐ State
	Street Address 395 W Main St		□ Federal
	City, State Zip Carlisle, KY 40311		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	W po	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		☐ Monthly
	Description 21st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C	7	
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002481		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 108,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
40	July 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	va En	ALICATION in the Demices for Application, heard areas
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	oto on	my, as stated in the Request for Application, based upon
	timeframes allowed by the Kentucky Finance & Administration Cabinet.	บเอ สก	u awaru nounications will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
'-	Division of Consolidated Plans & Audits		Date. Same 24, 2010
Ь	Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Owensboro Indepen	dent Schools			State
	Street Address 450 Griffith Avenue				□ Federal
	City, State Zip Owensboro, KY 423	302			Other:
				8	Method of Payment:
2	KDE Contact Information:				Federal Cash Request
		Stacy 502-564-1473 ext. 4072		10	
		o St., 19th Fl. CPT			Automatic Payment
	, 0	Hawkins 502-564-1979 ext. 43	61		Lump Sum
	Street Address 500 Mer	o St., 16th Fl. CPT	111	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfor	t, Kentucky 40601	1		
			505	9	Reimbursement Frequency:
3	Description/Fund Source of Award and	l Fiscal Year:	V		☐ Monthly
		tury Community Learning Cen	ters		□ Quarterly
		Left Behind Act, Title IV, Part			Other
	CFDA# 84.287C			9	
	MUNIS Project Number See bud	get on contract		10	Financial Reporting Method:
		40-1500002085			Electronic Submission
					Other Submission of quarterly reimbursement
			/		package
4	Grant Authority (Source):	(V9)			-
	No Child Left Behind Act of 2001, Title IV	, Part B, Education Departmer	nt General		
	Administrative Regulations 34 CFR 76,77				
	Guidance, 2 CFR § 200				
5	REVISED Award Amount: \$ 157,000		V	11	Evaluations: Submission of an annual report to Kentucky
		0			Department of Education is required
_	See budget breakdown on contract.	PROFICIENT &	PREP	AR	ED FOR
6	Period of Award:	CILC		III.	C C
12	August 1, 2015 - September 30, 2016 Consortia/Partnership Members:	5 0 6			3 3
	Special Instructions/Conditions:			7	
13		KENTUGKY DERART	ALFALT, CH	المصرية	ing, as stated in the Request for Application, based upon
					d award notifications will be prepared based upon the
	timeframes allowed by the Kentucky F			is all	u awaru notinications will be prepared based upon the
14	Authorized By (Name/Title): Donna T		miet.		Date: June 24, 2016
		of Consolidated Plans & Audits	<u>.</u>		Duto. Sullo 27, 2010
	I DIVISION (7 Consolidated Flans & Addits	,		

1	Name and Address of Recip		7	Fund Type:
		n Independent Schools		State
	Street Address PO Box	2550		□ Federal
	City, State Zip Paducah	n, KY 42003		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	*	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-51	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:	10	Monthly
	Description	21st Century Community Learning Centers	1	Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002086		Electronic Submission
	me, mamber	1 3112 3 13 133332333		Other Submission of quarterly reimbursement
		~(/)		package
4	Grant Authority (Source):			parage
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Ge	eneral	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	157,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. Proficient & P	DEDAR	ED EOR
6	Period of Award:	I NOTICILITY OF	METAN.	LDTOR
	August 1, 2015 - September 3			6 6
12	Consortia/Partnership Mem	bers:	Box	
13	Special Instructions/Condit		C - F	
				d award notifications will be prepared based upon the
			t.	
14	Authorized By (Name/Title):			Date: June 24, 2016
		Division of Consolidated Plans & Audits		
	Special Instructions/Condit Grants (New, Continuation, availability of funds from th timeframes allowed by the	ions: and Expansion) awarded for five years/pro	Contracts an	ing, as stated in the Request for Application, based upon d award notifications will be prepared based upon the Date: June 24, 2016

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Pendleto	on County Schools		State
	Street Address 2525 Hw	yy 27 N		
	City, State Zip Falmout	h, KY 41040		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	<u> </u>	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601	-	
	- 37	-53	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002482		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 20	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gen	eral	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	158,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. Proficient & P	REPAR	FD FOR
6	Period of Award:			6 6
	July 1, 2015 - September 30,			SS
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		IT OF E	DUCATION
				ling, as stated in the Request for Application, based upon
			ontracts an	nd award notifications will be prepared based upon the
4.		Kentucky Finance & Administration Cabinet.		Parts 1 04 0040
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
		Green Baptist Church		State
	Street Address PO Box	910240		□ Federal
	City, State Zip Lexingto	n, KY 40591		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	,	-5.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1600000442		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1 3
		001, Title IV, Part B, Education Department Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	40,750	11	Evaluations: Submission of an annual report to Kentucky
		0.0		Department of Education is required
•	See budget breakdown on o	contract. PROFICIENT & PRI	EPAR	ED FOR
6	Period of Award:	20,0040	-	CC
12	September 1, 2015 - Septem			3 3
	-			
13	Special Instructions/Condition		OF E	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		e United States Department of Education. Com Kentucky Finance & Administration Cabinet.	iracis an	u awaru nouncations will be prepared based upon the
14		Donna Tackett, Acting Director		Date: June 24, 2016
14	Additionized by (Name/Title).	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Save the Children		☐ State
	Street Address 126 Main Street		
	City, State Zip Berea, KY 40403		Other:
		8	Method of Payment:
2	KDE Contact Information:	a	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT	1 // /	Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361	4//	Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601	-	
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		☐ Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002102	4	Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 82,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		6 6
40	August 15, 2015 - September 30, 2016		5 5
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions:	as.Ei	THE CATION in the Demises for Application, beautiful
	Grants (New, Continuation, and Expansion) awarded for five years/projects	or tund	ing, as stated in the Request for Application, based upon
	availability of funds from the United States Department of Education. Contr timeframes allowed by the Kentucky Finance & Administration Cabinet.	acts an	iu awaru notifications will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
14	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
	Division of Consolidated Flans & Addits		

1	Name and Address of Recip		7	Fund Type:
	Agency Name Somerse	et Independent Schools		State
	Street Address 305 Coll	ege St		□ Federal
	City, State Zip Somerse	et, KY 42501		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	-	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002088		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 2	001, Title IV, Part B, Educa <mark>tion D</mark> epartment Genera	d \	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	80,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on	contract. Professional & Professiona	-040	FD FOR
6	Period of Award:	F KUFICIEN I OX F KI	HAK	ED FOK
	August 1, 2015 - September	30, 2016		C C
12	Consortia/Partnership Mem	bers:	Name of Street	3 3
13	Special Instructions/Condit			
				ing, as stated in the Request for Application, based upon
			racts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title)	: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

Agency Name Spencer County Schools □ State Street Address 207 W Main St □ Federal City, State Zip Taylorsville, KY 40071 □ Other:	
City, State Zip Taylorsville, KY 40071	
8 Method of Payment:	
2 KDE Contact Information: Federal Cash Request	
Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Expenditure Reimbursement	
Street Address 500 Mero St., 19th Fl. CPT Automatic Payment	
Budget Contact Thelma Hawkins 502-564-1979 ext. 4361 Lump Sum	
Street Address 500 Mero St., 16th Fl. CPT Receipt of Invoice from Vendor	-
City, KY Zip Frankfort, Kentucky 40601	
9 Reimbursement Frequency:	
3 Description/Fund Source of Award and Fiscal Year:	
Description 21 st Century Community Learning Centers Quarterly	
Fund Source No Child Left Behind Act, Title IV, Part B	
CFDA# 84.287C	
MUNIS Project Number See budget on contract 10 Financial Reporting Method:	
MOA Number PON2-540-1500002089 Electronic Submission	
Other Submission of quarte	erly reimbursement
package	,
4 Grant Authority (Source):	
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General	
Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant	
Guidance, 2 CFR § 200	
5 REVISED Award Amount: \$ 155,000 11 Evaluations: Submission of an annua	I report to Kentucky
Department of Education is required	
See budget breakdown on contract.	
6 Period of Award:	
August 1, 2015 - September 30, 2016	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions:	
Grants (New, Continuation, and Expansion) awarded for five years/projects of funding, as stated in the Request for Appli	
availability of funds from the United States Department of Education. Contracts and award notifications will be prepared	I based upon the
timeframes allowed by the Kentucky Finance & Administration Cabinet.	
14 Authorized By (Name/Title): Donna Tackett, Acting Director Date: June 24, 2016	
Division of Consolidated Plans & Audits	

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Taylor C	ounty Schools		State
	Street Address 1209 E I	Broadway		
	City, State Zip Campbe	ellsville, KY 42718		Other:
			8	Method of Payment:
2	KDE Contact Information:		22.5	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	II II -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	PH // /	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-43	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C	1	
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002090		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1111131
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	191,500	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	EDAR	FD FOR
6	Period of Award:			
	July 1, 2015 - September 30,		let .	5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		or Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
<u> </u>		Kentucky Finance & Administration Cabinet.		D
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Todd Co	ounty Schools		State
	Street Address 205 Airp	ort Rd		□ Federal
	City, State Zip Elkton, k	(Y 42220		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	HII/	Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers	-	□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002091		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
	No Child Left Behind Act of 26	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gener	al	
	Administrative Regulations 34	4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	155,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
_	See budget breakdown on o	contract. PROFICIENT & PR	EPAR	ED FOR
6		20 2040 6 11 6 6		C C
12	August 1, 2015 - September 3 Consortia/Partnership Mem			3 3
	-			
13	Special Instructions/Condit		c of fund	ing, as stated in the Request for Application, based upon
				d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.	macio dii	a awara nouncations will be prepared based upon the
14		Donna Tackett, Acting Director		Date: June 24, 2016
	, , , , , , , , , , , , , , , , , , ,	Division of Consolidated Plans & Audits		24101 24, 2010
L	l	Division of Concomutation Fluid a Addition		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Wayne (County Schools		State
	Street Address 1025 S I	Main St		□ Federal
	City, State Zip Monticel	lo, KY 42633		Other:
			8	Method of Payment:
2	KDE Contact Information:		220	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-2.3	9	Reimbursement Frequency:
3	Description/Fund Source of	Award and Fiscal Year:		☐ Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002092		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			1 22 232
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera	al	
		CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	300,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PRI	EDAR	ED EOR
6	Period of Award:	THOTICIENT OF THE	-77/11	LD T ON
	July 1, 2015 - September 30,			5 5
12	Consortia/Partnership Mem	bers:	Diam.	
13	Special Instructions/Condit		or Er	DUCATION
				ing, as stated in the Request for Application, based upon
			tracts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title):	Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Webster County Schools		State
	Street Address 28 State Rt 1340		
	City, State Zip Dixon, KY 42409		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	N P	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21st Century Community Learning Centers		□ Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2-540-1500002483		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200		
5	REVISED Award Amount: \$ 156,000	11	Evaluations: Submission of an annual report to Kentucky
			Department of Education is required
	See budget breakdown on contract.	PAR	ED FOR
6	Period of Award:		C C
12	July 1, 2015 - September 30, 2016		3 3
12	Consortia/Partnership Members:	7	
13	Special Instructions/Conditions:	va.Er	MICATION in the Demical for Application, beautiful
	Grants (New, Continuation, and Expansion) awarded for five years/projects of availability of funds from the United States Department of Education. Contra	n Tund	my, as stated in the Request for Application, based upon
	timeframes allowed by the Kentucky Finance & Administration Cabinet.	เบเธ สก	u awaru nouncations will be prepared based upon the
14	Authorized By (Name/Title): Donna Tackett, Acting Director		Date: June 24, 2016
'-	Division of Consolidated Plans & Audits		Date: 04110 24, 2010
L	Division of Consolidated Figure & Adults		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Whitley	County Schools		State
	Street Address 300 Mai	n St		□ Federal
	City, State Zip Williams	burg, KY 40769		Other:
			8	Method of Payment:
2	KDE Contact Information:		2-3	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	III -	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT	1	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•	-5.5	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		□ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500001280		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):	(V7)		
		001, Title IV, Part B, Educ <mark>ation D</mark> epartment Genera		
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	392,000	11	Evaluations: Submission of an annual report to Kentucky Department of Education is required
	See budget breakdown on	contract. PROFICIENT & DRI	DAD	ED FOR
6	Period of Award:	F KUFICIEN F CK F KE	PAK	ED FOK
	February 15, 2015 - Septemb	per 30, 2016		C C
12	Consortia/Partnership Mem	bers:		3 3
13	Special Instructions/Condit			
				ing, as stated in the Request for Application, based upon
			racts an	d award notifications will be prepared based upon the
		Kentucky Finance & Administration Cabinet.		
14	Authorized By (Name/Title)	: Donna Tackett, Acting Director		Date: June 24, 2016
		Division of Consolidated Plans & Audits		

1	Name and Address of Recip	pient:	7	Fund Type:
	Agency Name Woodfor	d County Schools		State
	Street Address 330 Pisc	gah Pk		□ Federal
	City, State Zip Versaille	es, KY 40383		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Thelma Hawkins 502-564-1979 ext. 4361		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	-53	9	Reimbursement Frequency:
3	Description/Fund Source of	f Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2-540-1500002094		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
	No Child Left Behind Act of 2	001, Title IV, Part B, Educ <mark>ation D</mark> epartment Gene	eral	
		4 CFR 76,77, 82 and 85 and Uniform Grant		
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$	82,000	11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on o	contract. PROFICIENT & PR	REPAR	ED FOR
6	Period of Award:	00 0040		6 6
40	August 1, 2015 - September 3			5 5
12	Consortia/Partnership Mem			
13	Special Instructions/Condit		T.OF.E	DUCATION:
				ing, as stated in the Request for Application, based upon
		ie United States Department of Education. Co Kentucky Finance & Administration Cabinet.	mtracts an	d award notifications will be prepared based upon the
14		: Donna Tackett, Acting Director		Date: June 24, 2016
14	Additionized by (Name/Title).	Division of Consolidated Plans & Audits		Date. Julie 24, 2010
		Division of Consolidated Flans & Addits		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name YMCA of Greater Cincinnati			☐ State
	Street Address 644 Linn Street, Ste 802			
	City, State Zip Cincinnati, KY 45203			Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant Brigette Stacy 502-564-	1473 ext. 4072	V -	
	Street Address 500 Mero St., 19th Fl. C	PTCKYUS		Automatic Payment
	Budget Contact Thelma Hawkins 502-56	4-1979 ext. 4361		Lump Sum
	Street Address 500 Mero St., 16th Fl. C	PT	-	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 406	01		
		-63	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:			☐ Monthly
	Description 21st Century Community	Learning Centers		☐ Quarterly
	Fund Source No Child Left Behind Ac			Other
	CFDA# 84.287C	, , , ,	9	
	MUNIS Project Number See budget on contract		10	Financial Reporting Method:
	MOA Number PON2-540-1500002103			Electronic Submission
				Other Submission of quarterly reimbursement
		-(/		package
4	Grant Authority (Source):	V-) ()		111113
	No Child Left Behind Act of 2001, Title IV, Part B, Education	ion Department General		
	Administrative Regulations 34 CFR 76,77, 82 and 85 and			
	Guidance, 2 CFR § 200			
5	REVISED Award Amount: \$ 1,198,000		11	Evaluations: Submission of an annual report to Kentucky
				Department of Education is required
	See budget breakdown on contract.	TENT & PDED	AR	FD FOR
6	Period of Award:		27.17.13.1 11	e e
	July 1, 2015 - September 30, 2016			6 6
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions:	DEDARTMENT	- E-	NICATION
				ng, as stated in the Request for Application, based upon
			ts and	d award notifications will be prepared based upon the
	timeframes allowed by the Kentucky Finance & Admi			
14	Authorized By (Name/Title): Donna Tackett, Acting D			Date: June 24, 2016
	Division of Consolidated	Plans & Audits		